

**INLAND COUNTIES EMERGENCY MEDICAL AGENCY***Serving San Bernardino, Inyo, and Mono Counties***515 N ARROWHEAD AVENUE
SAN BERNARDINO, CA 92415-0060
909-388-5823 FAX: 909-388-5825****MICN APPLICATION FOR INITIAL CERTIFICATION OR CERTIFICATION BY CHALLENGE**

PRINT OR TYPE - ALL ITEMS MUST BE COMPLETED

Legal Name: _____
Last First Middle Sex (M/F)

Address: _____
Number & Street City State Zip

Phone#: _____ Date of Birth: _____

Drivers License #: _____ SSN #: _____

Employer: _____

Submit copies (front & back) and list expiration dates for the following:

Current out of ICEMA
Region MICN Cert #: _____ Exp Date: _____
RN License#: _____ Exp Date: _____
ACLS Exp. Date: _____
Previous ICEMA #: _____ Exp Date: _____
Certified in a different name: _____

DOCUMENTATION OF EMPLOYMENT AS AN MICN**TO BE COMPLETED BY A DESIGNATED BASE HOSPITAL WITHIN THE ICEMA REGION**

I Verify that _____, RN License # _____ is currently/or will be employed at this facility as an MICN.

Facility Name	Authorized Signature/Title	Print Name	Date
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I hereby certify that the information listed is true and correct and that I am eligible for certification and am not precluded from certification for reasons defined in Section 1798.200 of the Health & Safety Code. I understand that any fraudulent entry on this application may be considered cause for denial or subsequent revocation of my certification. I hereby authorize ICEMA to verify any and all information contained herein and authorize release of any and all information as deemed relevant to the certification process and subsequent testing to my employer and/or assigned Base Hospital. I agree to hold ICEMA harmless from any act or action resulting from the release of the information as stated above.

Date	Signature
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**APPLICATION FEE (\$85.00/INITIAL, \$225.00/CHALLENGE) IS NOT REFUNDABLE,
TRANSFERABLE, AND MAY NOT BE PAID WITH PERSONAL CHECK**

**REQUIREMENTS FOR MICN CERTIFICATION
PROTOCOL 16001
EFFECTIVE 02/01/2003**

Initial MICN Certification

1. Possess a current California RN License
2. Successfully complete the ICEMA approved MICN course with a passing score of eighty percent (80%), and within six months of course completion, submit the appropriate ICEMA application with:
 - a. Fee as set by ICEMA
 - b. Written verification of employment at a designated Base Hospital within the ICEMA Region.
 - c. Copy of front and back of a current, signed ACLS Card.
 - d. Copy of front and back of current California RN License.
3. Photo taken at ICEMA when application is submitted. Applicant may submit a driver's license size photo (no tinted glasses or hats) with their application.
4. Upon completion of 1-3 above, the applicant will be scheduled to take the ICEMA exam.
5. Upon Passing the ICEMA written exam with a minimum score of eighty percent (80%), a provisional MICN card will be issued.
 - a. A candidate who fails to pass the ICEMA written exam on the first attempt will have to pay the ICEMA approved fee and re-take the exam with a minimum score of 85%.
 - b. A candidate who fails to pass the ICEMA written exam on the second attempt will have to pay the ICEMA approved fee, and provide documentation of eight (8) hours of remedial training in relation to ICEMA protocols, policies/procedures given by their PLN and pass the ICEMA exam with a minimum score of 85%.
 - c. If the candidate fails to pass the ICEMA exam on the third attempt, the ICEMA Medical Director will review the candidate's application to determine additional training requirements.
6. The individual may then function as a provisional MICN under the direct supervision of either the Base Hospital MD, PLN, or ICEMA approved designee for a maximum of six (6) months. The supervising individual must "co-sign" all MICN call forms.
7. The PLN will choose three (3) tapes for review (one trauma, one medical and one other) and submit them to their partnered Base Hospital PLN for review.
8. When three (3) tapes meet ICEMA criteria, a MICN card will be issued for two (2) years from the date of MICN course completion.
9. Failure to complete the entire process within one (1) year of application date constitutes failure of the entire process. The timeframe may be extended upon receipt of a request in writing from either the candidate or PLN outlining any extenuating circumstances.

Certification by Challenge Examination

1. Possess a current California RN License.
2. Meet one (1) of the following eligibility requirements:
 - a. MICN in another county within previous twelve (12) months.
 - b. MICN in ICEMA Region, but has let certification expire within the previous twenty-four (24) months, and has not fulfilled requirements for inactive MICN status.
3. Submit the appropriate ICEMA application with:
 - a. Fee as set by ICEMA.
 - b. Written verification of employment at a designated Base Hospital within the ICEMA Region.
 - c. Copy of front and back of a current, signed ACLS Card.
 - d. Copy of front and back of current California RN License.
4. Photo taken at ICEMA when application is submitted. Applicant may submit a driver's license size photo (no tinted glasses or hats) with their application.
5. Upon completion of 1-4 above, the applicant will be scheduled to take the ICEMA written exam.
6. Upon passing the ICEMA written exam with a minimum passing score of 80%, a provisional MICN card will be issued.
 - a. A candidate who fails to pass the ICEMA written exam on the first attempt will have to pay the ICEMA approved fee and re-take the exam with a minimum score of 85%.
 - b. A candidate who fails to pass the ICEMA written exam on the second attempt will have to pay the ICEMA approved fee, and provide documentation of eight (8) hours of remedial training in relation to ICEMA protocols, policies/procedures given by their PLN and pass the ICEMA exam with a minimum score of 85%.
 - c. If the candidate fails to pass the ICEMA exam on the third attempt, the ICEMA Medical Director will review the candidate's application to determine additional training requirements.
7. The individual may then function as a provisional MICN under the direct supervision of either the Base Hospital MD, PLN, or ICEMA approved designee. The supervising individual must "co-sign" all MICN call forms.
8. The PLN will choose three (3) tapes for review (one trauma, one medical and one other).
9. When three (3) tapes meet ICEMA criteria, a MICN card will be issued for two (2) years from the date of application.
10. Failure to complete the entire process within one (1) year of application date constitutes failure of the entire process. The timeframe may be extended upon receipt of a request in writing from either the candidate or PLN outlining any extenuating circumstances.